

B6F (Official Form 6F) (12/07)

In re Shemiya Princess O'BannonCase No. 08-92053-BHL

Debtor

AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H U S B A N D W I F E J O I N T C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. 22398101			7/6/08 Medical services				304.84
Clark Memorial Hospital P. O. Box 69 Jeffersonville, IN 47131		-					
Account No. 555259			7/7/08 Medical services				300.00
Emergency Med. Phy. Assoc 1214 Spring Street # 1 Jeffersonville, IN 47130-3704		-					
Account No.							
Account No.							
Subtotal (Total of this page)							604.84
Total (Report on Summary of Schedules)							604.84

0 continuation sheets attached

B6 Summary (Official Form 6 - Summary) (12/07)

United States Bankruptcy Court
Southern District of Indiana

In re Shemiya Princess O'Bannon

Debtor

Case No. 08-92053-BHLChapter 13

SUMMARY OF SCHEDULES - AMENDED

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	3	18,764.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		25,638.16	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		331.66	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	1		58,084.84	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			901.75
J - Current Expenditures of Individual Debtor(s)	Yes	1			409.75
Total Number of Sheets of ALL Schedules		12			
Total Assets			18,764.00		
Total Liabilities				84,054.66	

United States Bankruptcy Court
Southern District of Indiana

In re Shemiya Princess O'Bannon

Debtor

Case No. 08-92053-BHLChapter 13

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

- ☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	331.66
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	331.66

State the following:

Average Income (from Schedule I, Line 16)	901.75
Average Expenses (from Schedule J, Line 18)	409.75
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	1,311.42

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	265.66	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		66.00
4. Total from Schedule F		58,084.84
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		58,150.84

B6 Declaration (Official Form 6 - Declaration), (12/07)

**United States Bankruptcy Court
Southern District of Indiana**

In re Shemiya Princess O'Bannon
Debtor(s)

Case No. 08-92053-BHL
Chapter 13

DECLARATION CONCERNING DEBTOR'S SCHEDULES - AMENDED

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 14 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date September 11, 2009

Signature /s/ Shemiya Princess O'Bannon
Shemiya Princess O'Bannon
Debtor

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.

UNITED STATES BANKRUPTCY COURT
FOR THE
SOUTHERN DISTRICT OF INDIANA
NEW ALBANY DIVISION

IN RE:	}	
SHEMIYIA PRINCESS O'BANNON	}	CASE NO. 08-92053
	}	CHAPTER 13
DEBTOR(S)	}	

CERTIFICATE OF SERVICE AND
NOTICE OF §523 BAR DATE ON ADDED CREDITORS

As required by S.D. Ind. B-1009-1(b), the undersigned hereby certifies that the following documents have been served upon the creditors added to this case and listed below by first class mail, postage prepaid.

- ☒ X copy of amended schedule;
- ☒ X notice of meeting of creditors
- ☒ X plan dated 7/31/08
- ☐ [] notice of bar date (if any and if not shown on meeting notice);
- ☒ X notice of confirmation hearing;
- ☐ [] other (list any other pleading or notice served on all creditors prior to addition of creditor list).

In addition, by sending a copy of this certificate (or described separate notice), the undersigned has provided notice that- as to creditors added after the first date set for the meeting of creditors- the deadline for filing a complaint to determine if dischargeable is 60 days after the date the amendment was filed.

Date: 9/11/09

/s/ Lloyd E. Koehler
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U.S. Trustee
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Indianapolis, IN 46204

Joseph M. Black, Jr.
Chapter 13 Trustee
P.O. Box 846
Seymour, IN 47274-0846

Clark Memorial Hospital
P. O. Box 69
Jeffersonville, IN 47131

Emergency Med. Phy. Assoc.
1214 Spring St., #1
Jeffersonville, IN 47130-3704